



CONNECTICUT ASSOCIATION FOR
HEALTHCARE AT HOME™

CAHCF
Connecticut Association of Health Care Providers



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**The Medicaid Eligibility Determination Crisis:
Need for Immediate Remedies for Consumers and Providers
Throughout the Continuum of Care and Services**

As statewide associations representing providers of Medicaid services throughout the continuum, we urge the state legislature to immediately address the crisis caused by delays in the Medicaid eligibility determination process.

Delays in Medicaid eligibility determination are adversely affecting both the individuals desperately in need of services and the providers of medical care and long-term services and supports across the continuum.

We understand that DSS is attempting to find solutions to the issues and will continue to work with them toward long-term solutions, but the crisis is immediate and we are asking for system-wide attention and relief now.

The problems are system-wide:

- Older adults and individuals with disabilities who should be eligible for home and community-based services through the Connecticut Home Care Waiver Program are not receiving services due to the delays in processing their Medicaid applications. These are individuals who are at risk of nursing home placement or emergency hospital care if they are not able to receive services and supports through the home care program.
- Skilled nursing facilities are caring for residents with pending status for months and months without receiving any reimbursement. Meanwhile the state is continuing to collect a daily bed tax on those same residents.
- Home care agencies sit on phone lines for hours and hours, waiting to speak to eligibility workers to assist their home care clients who are seeking Medicaid coverage for desperately needed medical home care services.
- Hospital discharges are delayed for days, weeks, and months while patients wait for their Medicaid eligibility determination so that placement can be found in the next level of the continuum.
- Hospitals, physicians, home care agencies, and nursing homes are providing care without funding or reimbursement while patients wait for their Medicaid eligibility determination. Moreover, during that time patients have to rely on the Emergency Department for their primary source of care, since without coverage their access to care is limited.

The Medicaid eligibility determination problems are system-wide. We therefore need a system-wide approach to developing and enacting solutions. We urge you to take immediate action and we offer you our assistance in this endeavor.

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